

K993146

# 510(k) SUMMARY OF SAFETY AND EFFECTIVENESS Dornier Surgical Products, Inc.'s Scanner for Medilas E Laser

In response to the Safe Medical Devices Act of 1990, the following is a summary of the safety and effectiveness information upon which the substantial equivalence determination is based.

The safety and effectiveness of the Dornier Scanner is based upon a determination of the substantial equivalence as well as the safety and effectiveness of its predicate devices, which includes the following: Dornier VarioSpot 90 handpiece (K981438) and Coherent's Computerized Pattern Generator (CPG) (K946304) scanner.

# Submitter's Name, Address, Telephone Number, Contact Person and Date Prepared

Dornier Surgical Products, Inc.

10027 South 51st Street

Phoenix, AZ 85044

Phone:

770-693-5793

Facsimile:

770-693-5770

Date Prepared: September 13, 1999

Contact Person: Carol Wernecke

Phone:

770-426-1315

Fax:

770-514-6288

# Name of Device and Name/Address of Sponsor

Dornier Scanner Dornier Surgical Products, Inc. 10027 South 51st Street Phoenix, AZ 85044

## **Classification Name**

ER:YAG lasers and their accessories have not been specifically classified by FDA.

#### **Predicate Devices**

Dornier *VarioSpot 90* handpiece (K981438) Coherent's Computerized Pattern Generator (CPG) (K946304) scanner

#### Intended Use

The Dornier Scanner handpiece is intended to be used in general and surgical procedures for incision / excision, vaporization, ablation, and coagulation of soft tissue and cartilage. The Dornier Scanner may also be used for skin resurfacing.

The Dornier Scanner is for use as an accessory for the Dornier Medilas E Laser (K981438). It is indicated for use in medicine and surgery in the medical specialties as listed in the Indication for Use Statement for the Dornier Medilas E Laser System.

No new indications are being requested.

# **Technological Characteristics and Substantial Equivalence**

From a clinical perspective and comparing design specifications, the Dornier *Scanner* and the predicate devices are substantially equivalent and have the same intended use. Based on the technological characteristics and overall performance of the devices, Dornier Surgical Products, Inc. believes that no significant differences exist between the Dornier *Scanner* and the predicate devices, Dornier *VarioSpot 90* handpiece (K981438) and Coherent's Computerized Pattern Generator (CPG) (K946304) scanner.

Dornier Surgical Products, Inc. believes the minor differences of the Dornier *Scanner* and its predicate laser devices should not raise any concerns regarding the overall safety or effectiveness.

Advisory:

This information was prepared for the sole purpose of compliance with the Safe Medical Devices Act of 1990. It does not imply that the procedures described herein can be performed with the equipment described without substantial risk of personal injury or death to patients due to operator error or in procedures requiring a high degree of skill.



NOV - 8 1999

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Carol Wernecke Dornier Surgical Products, Inc. c/o Dornier Medical Systems, Inc. 1155 Roberts Boulevard Kennesaw, Georgia 30144

Re: K993146

Trade Name: Dornier Scanner Handpiece

Regulatory Class: II Product Code: GEX

Dated: September 15, 1999 Received: September 20, 1999

Dear Ms. Wernecke:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours.

Celia M. Witten, Ph.D., M.D.

Director

Division of General and Restorative Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure

# PREMARKET NOTIFICATION

# INDICATIONS FOR USE STATEMENT

510(k) Number:	K993146
Device Name:	Dornier Scanner
Indications for Use:	
procedures for incis	ner handpiece is intended to be used in general and surgical ion / excision, vaporization, ablation, and coagulation of soft tissue Dornier Scanner may also be used for skin resurfacing.
(K981438). It is ind	er is for use as an accessory for the Dornier Medilas E Laser cated for use in medicine and surgery in the medical specialties as in for Use Statement for the Dornier Medilas E Laser System.
No new indications a	are being requested.
Conc	urrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use	or Over-the-Counter Use
	Division Sign-Off)  On of General Restorative Devices K993146